EXHIBIT B

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Claim Number
Date Received

BERNARD L. MADOFF INVESTMENT SECURITIES LLC

In Liquidation

DECEMBER 11, 2008

Irving H. Picard, Esq. Trustee for Bernard L. Madoff Investment Securities LLC Claims Processing Center 2100 McKinney Ave., Suite 800 Dallas, TX 75201

Provide your office and home telephone no. CEll

OFFICE: 516 972-1829

HOME: 516 773-0119

Taxpayer I.D. Number (Social Security No.) 124-28-5069

Account Number: 1D0050 -- 3 - 0 KARL DROBITSKY 100050-4-0

90 SCHENCK AVE APT# 3N GREAT NECK, NY 11021

(If incorrect, please change)

ESTIMATED CLAIM

BASED ON NOV. 30, ZOOS VALUES

NOTE:

BEFORE COMPLETING THIS CLAIM FORM, BE SURE TO READ CAREFULLY THE ACCOMPANYING INSTRUCTION SHEET. A SEPARATE CLAIM FORM SHOULD BE FILED FOR EACH ACCOUNT AND, TO RECEIVE THE FULL PROTECTION AFFORDED UNDER SIPA, ALL CUSTOMER CLAIMS MUST BE RECEIVED BY THE TRUSTEE ON OR BEFORE March 4, 2009. CLAIMS RECEIVED AFTER THAT DATE, BUT ON OR BEFORE July 2, 2009, WILL BE SUBJECT TO DELAYED PROCESSING AND TO BEING SATISFIED ON TERMS LESS FAVORABLE TO THE CLAIMANT. PLEASE SEND YOUR CLAIM FORM BY CERTIFIED MAIL - RETURN RECEIPT REQUESTED.

All VALUES AS of NOV. 30, 2008

Claim for money balances as of December 11, 2008:

- The Broker owes me a Credit (Cr.) Balance of a.
- b. I owe the Broker a Debit (Dr.) Balance of

\$ 22, 408 (STRS, 11/17, F. BILL)

1.

	C.	please	wish to repay the e insert the amount a check payable	t you wish to rep	•		en.
•			ee for Bernard L. N	<u> </u>	•	•	
		lf you	wish to make a pa	yment, it must b	e encl	osed	
		with th	nis claim form.			\$	· · · · · · · · · · · · · · · · · · ·
	d.	. If bala	ince is zero, insert	"None."			ONE
	2. C	laim for se	ecurities as of Dec	ember 11, 2008:			
• •	PLEASE D	O NOT C	LAIM ANY SECU	RITIES YOU HAV	/E IN Y	OUR POSS	SESSION.
			•		YE	ES	NO
	a.	The B	roker owes me se	curities .		50.91	
	b.	l owe	the Broker securit	ies (SFP 100 INDEX)	6	600.	9,320.
	C.		to either, please lis		(L C N	10-)	(Shopp)
EASE S	Date of	+ed ata	-TEHENT AS of	NOV. 30, 2008			of Shares or ount of Bonds
	Transaction (trade date)		Name of	Security		Owes Me (Long)	the Broker (Short)
		- -			-		
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		-			_		
	claim and Please enc sale confin	shorten to lose, if pomations a	ion can speed th the time required ossible, copies of and checks which	I to deliver your your last accou relate to the sec	secur nt state urities	ities and o ement and or cash yo	ash to you. purchase or u claim, and
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information regarding any withdrawals you have ever made or payments received from the Debtor.

Please explain any differences between the securities or cash claimed and the cash balance and securities positions on your last account statement. If, at any time, you complained in writing about the handling of your account to any person or entity or regulatory authority, and the complaint relates to the cash and/or securities that you are now seeking, please be sure to provide with your claim copies of the complaint and all related correspondence, as well as copies of any replies that you received.

PLEASE CHECK THE APPROPRIATE ANSWER FOR ITEMS 3 THROUGH 9.

NOTE: IF "YES" IS MARKED ON ANY ITEM, PROVIDE A DETAILED EXPLANATION ON A SIGNED ATTACHMENT. IF SUFFICIENT DETAILS ARE NOT PROVIDED, THIS CLAIM FORM WILL BE RETURNED FOR YOUR COMPLETION.

	YES	<u>NO</u>
3. Has there been any change in your account since December 11, 2008? If so, please explain.	·	NOT SURE
4. Are you or were you a director, officer, partner, shareholder, lender to or capital contributor of the broker?		<u>No</u>
5. Are or were you a person who, directly or indirectly and through agreement or otherwise, exercised or had the power to exercise a controlling influence over the management or policies of the broker?		No
Are you related to, or do you have any business venture with, any of the persons specified in "4" above, or any employee or other person associated in any way with the broker? If so, give name(s)	•	_No
7. Is this claim being filed by or on behalf of a broker or dealer or a bank? If so, provide documentation with respect to each public customer on whose behalf you are claiming.		
8. Have you ever given any discretionary authority to any person to execute securities transactions with or through the broker on your behalf? Give names, addresses and phone numbers.		No

9.	Have you or any member of your family ever filed a claim under the Securities Investor Protection Act of 1970? if so, give name of that broker.									
	Please list the full name and address of anyone assisting you in the preparation of this claim form:									
If you cannot compute the amount of your claim, you may file an estimated claim. In that case, please indicate your claim is an estimated claim.										
IT IS A VIOLATION OF FEDERAL LAW TO FILE A FRAUDULENT CLAIM. CONVICTION CAN RESULT IN A FINE OF NOT MORE THAN \$50,000 OR IMPRISONMENT FOR NOT MORE THAN FIVE YEARS OR BOTH.										
	REGOING CLAIM IS TR ATION AND BELIEF.	UE AND A	ACCURATE	TO THE BEST	OF MY					
Date _F	EB. 23, 2009	Signature	Karl	Drobotely						
Date	·	Signature								
(If ownership of the account is shared, all must sign above. Give each owner's name, address, phone number, and extent of ownership on a signed separate sheet. If other than a personal account, e.g., corporate, trustee, custodian, etc., also state your capacity and authority. Please supply the trust agreement or other proof of authority.)										

This customer claim form must be completed and mailed promptly, together with supporting documentation, etc. to:

Irving H. Picard, Esq.,
Trustee for Bernard L. Madoff Investment Securities LLC
Claims Processing Center
2100 McKinney Ave., Suite 800
Dallas, TX 75201

Doc 2786-2 Filed 07/20/10 Entered 07/20/10 11:59:04 Exhibit B Pg 6 of **825 Third Avenue**

Affiliated with Madoff Securities International Limited 12 Berkeley Street Mayfair, London W1J 8DT

BERNARD L. MADOFF INVESTMENT SECURITIES LLC MADE New York □ London

New York, NY 10022. (212) 230-2424 800 334-1343 Fax (212) 838-4061

KARL DROBITSKY

11/30/08

Tel 020 7493 6222

90 SCHENCK AVE APT# 3N GREAT NECK NY 11021

(1-D0050-3-0)

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Affiliated with Madoff Securities International Limited 12 Berkeley Street Mayfair, London W1J 8DT Tel 020 7493 6222

BERNARD L. MADOFF MADE INVESTMENT SECURITIES LLC New York

London

Pg 7 of **\$65** Third Avenue New York, NY 10022 (212) 230-2424 800 334-1343 Fax (212) 838-4061

KARL DROBITSKY

PERIOD ENGING 11/30/08

90 SCHENCK AVE APT# 3N GREAT NECK NY 11021

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PLEASE RETAIN THIS STATEMENT FOR INCOME TAX PURPOSES

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BERNARD L. MADOFF INVESTMENT SECURITIES LLC MADE New York

London

Pg 8 of **BB5 Third Avenue** New York, NY 10022 (212) 230-2424 800 334-1343 Fax (212) 838-4061

KARL DROBITSKY

11/30/08

90 SCHENCK AVE APT# 3N GREAT NECK NY 11021 1-D0050-3-0

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			AMGEN INC	55.540		
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Affiliated with **Madoff Securities International Limited** 12 Berkeley Street Mayfair, London W1J 8DT

BERNARD L. MADOFF MADE INVESTMENT SECURITIES LLC New York

London

Pg 9 of **225 Third Avenue** New York, NY 10022 (212) 230-2424 800 334-1343 Fax (212) 838-4061

KARL DROBITSKY

11/30/08

Tel 020 7493 6222

90 SCHENCK AVE APT# 3N GREAT NECK

NY 11021

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Affiliated with Madoff Securities International Limited 12 Berkeley Street Mayfair, London W1J 8DT Tel 020 7493 6222

BERNARD L. MADOFF INVESTMENT SECURITIES LLC MADF New York □ London

Pg 10 of 8825 Third Avenue New York, NY 10022 (212) 230-2424 800 334-1343 Fax (212) 838-4061

KARL DROBITSKY

11/30/08

90 SCHENCK AVE NY 11021 GREAT NECK

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YOUR TAX PAYER IDENTIFICATION NUMBER ******5069

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BERNARD L. MADOFF INVESTMENT SECURITIES LLC MADF New York

London

Pg 11 of 883 Third Avenue New York, NY 10022 (212) 230-2424 800 334-1343 Fax (212) 838-4061

Affiliated with Madoff Securities International Limited 12 Berkeley Street Mayfair, London W1J 8DT Tel 020 7493 6222

KARL DROBITSKY

90 SCHENCK AVE APT# 3N GREAT NECK

NY. 11021

11/30/08

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Pg 12 of 883 Third Avenue New York, NY 10022 (212) 230-2424 800 334-1343 Fax (212) 838-4061

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